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NOTICE OF ALL	OWANCE MAILED		CLAIMS ALLOWED					
		Assistant Examiner	Total Claims		Print O.G	t Claim for		
ISS	UE FEE		DRAWING					
Amount Due	Date Paid		Sheets Drwg.	Figs.Drv	vg.	Print Fig		
<u> </u>	<u> </u>	Primary Examiner						
TER	RMINAL	PREPARED FOR ISSUE	Application Examiner					
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